STATE OF WASHINGTON OFFICE OF INSURANCE COMMISSIONER CONTINUING EDUCATION PROVIDER APPLICATION

Provider Name:	
Mailing Address:	
Physical Address:	
Phone Number: Fax Number:	
E-mail address: Contact person:	
Does your organization operate under name(s) which are not shown above? YES NO If YES, enter those name(s):	
Please read the following very carefully and answer every question. 1. Has the business entity or any owner, partner, officer or director ever been convicted of, or is the business entity or any owner, partner, officer or director currently charged with committing a crime, whether or not adjudication was withheld? "Crime" includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations and misdemeanor juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of judge or jury, having entered a plea of guilty or nolo contendre, or having been given probation, a suspended sentence or a fine. If you answer yes, you must attach to this application:	
 a) a written statement explaining the circumstances of each incident, b) a photocopy of the certified charging document, and c) a photocopy of the certified official document which demonstrates the resolution of the charges or any final judgment 2. Has the business entity or any owner, partner, officer or director ever been involved in an administrative proceeding regarding any professional or occupational license? "Involved" means having a license censured, suspended, revoked, canceled, terminated or being assessed a fine, placed probation or surrendering a license to resolve an administrative action. "Involved" also means being named as a party an administrative or arbitration proceeding which is related to a professional or occupational license. "Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. If you answer yes, you must attach to this application: 	
 a) a written statement identifying the type of license and explaining the circumstances of each incident, b) a photocopy of the certified Notice of Hearing or other document that states the charges and allegations, a a photocopy of the certified official document which demonstrates the resolution of the charges or any fin judgment. 3. Is the business entity or any owner, partner, officer or director a party to, or ever been found liable in any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? If you answer yes, you must attach to this application: a) a written statement identifying the type of license and explaining the circumstances of each incident, b) a photocopy of the certified Notice of Hearing or other document that states the charges and allegations, a photocopy of the certified official document which demonstrates the resolution of the charges or any final judgment 	Yes No
I do hereby certify by affixing my signature below, that the information I have presented on this Application, is complete, true, accurate and complies with Chapter 284-17 WAC.	
Person Responsible Signature: Date:	

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